

NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

AND

INSTRUCTIONS

2015 EDITION

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSU	FOR INSURANCE COMPANY USE		
A1. Building Own							Policy Nur	nber:
	K. Hovnanian Homes							
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 175 Shelton Street 					Company	NAIC Number:		
City Richmond Hill	State Hill Georgia				ZIP Code 31324	-		
A3. Property Desc	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)							
Lot 183 of Creekside Subdivision Phase VI								
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential								
A5. Latitude/Long	itude: Lat. 3	1°55'00.77"	Long	81°17'25.71"	Horizo	ontal Datur	m: 🗌 NAD	1927 X NAD 1983
A6. Attach at leas	t 2 photograp	ohs of the building if th	e Certifi	cate is being	used to obtain	flood insur	ance.	
A7. Building Diagr	am Number	1A						
A8. For a building	with a crawls	space or enclosure(s):						
a) Square foo	tage of craw	Ispace or enclosure(s)		N/A sq ft			
b) Number of	permanent fle	ood openings in the cr	awispac	e or enclosur	e(s) within 1.0	foot above	adjacent gr	ade N/A
c) Total net ar	ea of flood o	penings in A8.b		N/A sq i	n			
d) Engineered	flood openir	ngs? ☐ Yes ⊠ I	No					
A9. For a building v	vith an attach	ned garage:						
a) Square foot	age of attach	ned garage		371.50 sq f	t			
		ood openings in the at				adiacent o	rade N/A	
		penings in A9.b		N/A so		,		
			do.					
d) Engineered flood openings? ☐ Yes ☒ No								
	SE	CTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM)	INFORMA	TION	
B1. NFIP Community Name & Community Number			B2. County Name			B3. State		
City of Richmond H	iil 130018			Bryan				Georgia
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. B	ase Flood E Zone AO, use	levation(s) e Base Flood Depth)
13029C0291C	С	05-05-2014	03-02-2	vised Date 2009	AE	13.0		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes X No								
Designation D	\ata.			☐ OPA			•••••••••••••••••••••••••••••••••••••	

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IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and 175 Shelton Street	Policy Number:						
1		Code 324	Company NAIC Number				
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)							
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.							
E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).a) Top of bottom floor (including basement,							
crawlspace, or enclosure) is b) Top of bottom floor (including basement,	:	feet meter	s above or below the HAG.				
crawlspace, or enclosure) is		feet meter					
E2. For Building Diagrams 6–9 with permanent flood on the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided in Sect	feet meter					
E3. Attached garage (top of slab) is		feet meter	s above or below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter	s above or below the HAG.				
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the bottom No Unknown. Th	floor elevated in acc e local official must o	cordance with the community's certify this information in Section G.				
SECTION F - PROPERTY OWN	ER (OR OWNER'S REP	RESENTATIVE) CE	RTIFICATION				
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.							
Property Owner or Owner's Authorized Representative's Name							
Address	City	Sta	te ZIP Code				
Signature	Date	Tel	ephone				
Comments							
			Check here if attachments.				

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including 175 Shelton Street			
City	State	ZIP Code	Company NAIC Number
Richmond Hill	Georgia	31324	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption Front View

Clear Photo One



Photo Two Caption Rear View

Clear Photo Two

Georgia Residential Energy Code Compliance Certificate*

	Address: Lot 183 Creekside			Permit #:			
Builder/De	uilder/Design Prof.: K. Hov.			ne:			
Envelope	<u>Summary:</u>						
 List the 	R-Value for the following	components:					
	Flat ceiling/roo Exterior wa Attic kneewa Basement stud wa Crawlspace stud wa Foundation sla Cantilevered Floo	all: R13 bil: NA all: NA bil: NA	Abov Attic k Bas Craw	oped/vault ceiling e grade mass wall neewall sheathing ement continuous Ispace continuous conditioned space Other insulation	: NA : NA : NA : NA : R19		
 Fenestr 	ration Components:						
Gla	Window U-factor: Skylight U-factor: Zed Door U-factor:		Skyligh Opaque Door I	w SHGC: Nt SHGC: NA J-factor: glazed)			
 Building 	g Envelope Tightness (BET	·):					
BET test c	onducted by: Green S	South Energy S	Solutions-P	hone: 721 -20	13		
	at 50 Pascals= 1211						
Low Rise No. (The visual insport Visual insport Mechanical Water Heat Number of Heating Systems).	FM ₅₀ x 60 / Volume= 3 Multifamily Visual Inspector option may be conducted by: Mal Summary: al Summary: ater Energy Factor: 93 f Heating and Cooling System Type: Gas: AFUE	ction Option d by a third-party instead Ef Fue ystems: 1	of the BET test for F Pho I type: Gas	R-2 buildings only.) ne: NA Electric] Other		
	Other:			ПЭРГ			
Cooling Sy	stem Type (Standard DX stem Efficiency: 14	, Heat Pump, Geothe	rmal, etc.): Hea	<u>ut Pumb</u>] Other			
	ooling Load Calculations						
Total Cool Cooling Se Total Air H	ing Load (Based on ACCA Ma ing Load (Based on ACCA Ma ensible Load: landler CFM (based on de	n. J or other approved met Btu/h Cooling esign calculations):	hodology): g Latent Load	Btu/h : Btu CFM			
	ness Test Conducted by						
CFM $_{25}$ per $100~\text{ft}^2$ of conditioned floor area = CFM $_{25}$ x 100 / Conditioned floor area served If all ducts are not located within conditioned space, builder must verify that either the postconstruction duct leakage to outdoors (PCO) is $\leq 8\%$, the post construction total duct leakage (PCT) is $\leq 12\%$, or the rough-in total duct leakage (RIT) with air handler installed is $\leq 6\%$. State which method was used to conduct the duct tightness test: duct blower (DB), modified blower door subtraction method (MBDS), or automated multipoint blower door (AMBD).							
System	Method (DB, MBDS, AMBD)	Test (PCO, PCT, RIT)		Area served (ft²)	Result (%)		
1	DB	PCT	235	2179	17636530		
3			-				

*Note: This permanent certificate shall be posted on or in the electrical distribution panel or air handler. Certificate shall be completed by the builder or registered design professional. Where there is more than one value for each component, certificate shall list the value covering the largest area.